

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Oregon Republican Party

ADDRESS (number and street)

Post Office Box 789

☐Check if different
than previously
reported. (ACC)

Salem

OR

97308

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00153031

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☒

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2004

through

07

31

2004

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Charles S. Oakes

Signature of Treasurer

Electronically Filed by Charles S. Oakes

Date

10

30

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	4

To:

M	M	D	D	Y	Y	Y	Y
0	7	3	1	2	0	0	4

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2004		11331.57
(b) Cash on Hand at Beginning of Reporting Period	160157.20	
(c) Total Receipts (from Line 19)	225545.57	879309.77
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	385702.77	890641.34
7. Total Disbursements (from Line 31)	110733.30	615671.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	274969.47	274969.47
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	108906.50	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	4

To:

M	M	D	D	Y	Y	Y	Y
0	7	3	1	2	0	0	4

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	54085.00	543164.72
(i) Itemized (use Schedule A)	21240.37	170374.85
(ii) Unitemized	75325.37	713539.57
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	500.00	500.00
(b) Political Party Committees	0.00	9850.00
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤	75825.37	723889.57
12. Transfers From Affiliated/Other Party Committees	148979.00	149979.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	741.20	741.20
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	4700.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	4700.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	225545.57	879309.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	225545.57	874609.77

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	7868.33	60564.73
(i) Federal Share.....		
(ii) Non-Federal Share.....	13988.17	107670.64
(b) Other Federal Operating Expenditures.....	37238.73	136846.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	59095.23	305081.41
22. Transfers to Affiliated/Other Party Committees.....	4925.00	76905.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	433.75
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	100.00
29. Other Disbursements.....	0.00	4445.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	46713.07	228706.71
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	46713.07	228706.71
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	110733.30	615671.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	96745.13	508001.23

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	75825.37	723889.57
34. Total Contribution Refunds (from Line 28(d))	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	75825.37	723789.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	45107.06	197410.77
37. Offsets to Operating Expenditures (from Line 15, page 3)	741.20	741.20
38. Net Operating Expenditures (subtract Line 37 from Line 36)	44365.86	196669.57

SCHEDULE L (FEC Form 3X)

6 / 85

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL1

NAME OF COMMITTEE (In Full)
Oregon Republican Party

NAME OF ACCOUNT
KEY LEVIN

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	7300.00	33300.00
b. Unitemized.....	0.00	255.93
c. Total.....	7300.00	33555.93
2. OTHER RECEIPTS.....	6650.00	87800.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	13950.00	121355.93
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	209.48
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	209.48
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	107196.45	0.00
8. RECEIPTS..... (from Line 3)	13950.00	121355.93
9. SUBTOTAL..... (Add Lines 7 and 8)	121146.45	121355.93
10. DISBURSEMENTS..... (From Line 6)	0.00	209.48
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)		121146.45

SCHEDULE L-A (FEC Form 3X) **ITEMIZED RECEIPTS OF LEVIN FUNDS**

Use separate schedule(s)
for each category of the
Aggregation Page

PAGE 7 / 85

FOR LINE NUMBER:
(check only one) ☒ 1a ☐ 2

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Joan Austin

Mailing Address PO Box 209

City

Newberg

State

OR

Zip Code

97132-0209

Name of Employer or Principal Place of Business

A-dec, Inc.

Occupation

CEO

Transaction ID:SLC74912

Date of Receipt

/ /
0 7 / 2 1 / 2 0 0 4

Amount of Each Receipt this Period

2250.00

Aggregate Year-to-Date

2250.00

Account: 8

Full Name (Last, First, Middle Initial)

B. Howard Day

Mailing Address 65525 Gerking Market Road

City

Bend

State

OR

Zip Code

97701-9081

Name of Employer or Principal Place of Business

Self Employed

Occupation

Rancher

Transaction ID:SLC75220

Date of Receipt

/ /
0 7 / 2 8 / 2 0 0 4

Amount of Each Receipt this Period

250.00

Aggregate Year-to-Date

250.00

Account: 8

Full Name (Last, First, Middle Initial)

C. Dennis Morgan

Mailing Address 36249 Peel Ln

City

Springfield

State

OR

Zip Code

97478-9772

Name of Employer or Principal Place of Business

Forest Products Research

Occupation

Manager

Transaction ID:SLC74322

Date of Receipt

/ /
0 7 / 0 1 / 2 0 0 4

Amount of Each Receipt this Period

850.00

Aggregate Year-to-Date

1000.00

Account: 8

Full Name (Last, First, Middle Initial)

D. Dennis Morgan

Mailing Address 36249 Peel Ln

City

Springfield

State

OR

Zip Code

97478-9772

Name of Employer or Principal Place of Business

Forest Products Research

Occupation

Manager

Transaction ID:SLC75215

Date of Receipt

/ /
0 7 / 2 8 / 2 0 0 4

Amount of Each Receipt this Period

2250.00

Aggregate Year-to-Date

3250.00

Account: 8

SUBTOTAL of Receipts This Page (optional)

5600.00

TOTAL This Period (last page this line number only)

SCHEDULE L-A (FEC Form 3X) **ITEMIZED RECEIPTS OF LEVIN FUNDS**

Use separate schedule(s)
for each category of the
Aggregation Page

PAGE 8 / 85

FOR LINE NUMBER:
(check only one)

☒ 1a ☐ 2

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Donna Woolley

Mailing Address PO Box 43

City
Drain

State
OR

Zip Code
97435-0043

Name of Employer or Principal Place of Business
Eagles View Management

Occupation
CEO

Full Name (Last, First, Middle Initial)

B. Donna Woolley

Mailing Address PO Box 43

City
Drain

State
OR

Zip Code
97435-0043

Name of Employer or Principal Place of Business
Eagles View Management

Occupation
CEO

Transaction ID:SLC74321

Date of Receipt

/ /
0 7 / 0 1 / 2 0 0 4

Amount of Each Receipt this Period

850.00

Aggregate Year-to-Date

850.00

Account: 8

Transaction ID:SLC75222

Date of Receipt

/ /
0 7 / 2 8 / 2 0 0 4

Amount of Each Receipt this Period

850.00

Aggregate Year-to-Date

1700.00

Account: 8

SUBTOTAL of Receipts This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

7300.00

SCHEDULE L-A (FEC Form 3X) **ITEMIZED RECEIPTS OF LEVIN FUNDS**

Use separate schedule(s)
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Aggregation Page

PAGE 9 / 85

FOR LINE NUMBER: ☐ 1a ☒ 2
(check only one)

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Columbia Helicopters, Inc.

Mailing Address PO Box 3500

City

Portland

State

OR

Zip Code

97208-

Name of Employer or Principal Place of Business

Columbia Helicopters

Occupation

Aviation

Full Name (Last, First, Middle Initial)

B. Friends of Linda Flores

Mailing Address PO Box 55

City

Clackamas

State

OR

Zip Code

97015-

Name of Employer or Principal Place of Business

Occupation

PAC # 4318

Full Name (Last, First, Middle Initial)

C. Freres Lumber Co. Inc.

Mailing Address PO Box 276

City

Lyons

State

OR

Zip Code

97358-0276

Name of Employer or Principal Place of Business

Occupation

Full Name (Last, First, Middle Initial)

D. J.C. Milne Real Properties

Mailing Address 1312 SW 16th Avenue

City

Portland

State

OR

Zip Code

97201-

Name of Employer or Principal Place of Business

Occupation

Transaction ID:SLC75217

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 8 / 2 0 0 4

Amount of Each Receipt this Period

2500.00

Aggregate Year-to-Date

2500.00

Account: 8

Transaction ID:SLC75219

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 8 / 2 0 0 4

Amount of Each Receipt this Period

500.00

Aggregate Year-to-Date

500.00

Account: 8

Transaction ID:SL71017.C93132

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 8 / 2 0 0 4

Amount of Each Receipt this Period

2500.00

Aggregate Year-to-Date

12500.00

Account: 8

Transaction ID:SL71025.C93285

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 4 / 2 0 0 4

Amount of Each Receipt this Period

250.00

Aggregate Year-to-Date

250.00

Account: 8

SUBTOTAL of Receipts This Page (optional)

5750.00

TOTAL This Period (last page this line number only)

SCHEDULE L-A (FEC Form 3X) **ITEMIZED RECEIPTS OF LEVIN FUNDS**

Use separate schedule(s)
for each category of the
Aggregation Page

PAGE 10 / 85

FOR LINE NUMBER: ☐ 1a ☒ 2
(check only one)

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Oregon Commercial Properties Corp.

Mailing Address 1934 SW Highland Road

City
Portland

State
OR

Zip Code
97221-

Name of Employer or Principal Place of Business

Occupation

Transaction ID:SLC75218

Date of Receipt

/ /

Amount of Each Receipt this Period

500.00

Aggregate Year-to-Date

500.00

Account: 8

Full Name (Last, First, Middle Initial)

B. Terra-Webber LLC

Mailing Address 16869 SW 65th Avenue #260

City
Lake Oswego

State
OR

Zip Code
97035-

Name of Employer or Principal Place of Business

Self

Occupation

Real Estate

Transaction ID:SLC75221

Date of Receipt

/ /

Amount of Each Receipt this Period

250.00

Aggregate Year-to-Date

250.00

Account: 8

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

6500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Frosti Adams		Date of Receipt M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 4
Mailing Address 705 W 1st St		Transaction ID: C74311
City Newberg	State OR	Zip Code 97132-2419
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer American Family Insurance	Occupation Office Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Receipt

B. Full Name (Last, First, Middle Initial) Henry G. Alarcon		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 4
Mailing Address 3401 Barrington Drive		Transaction ID: C75212
City West Linn	State OR	Zip Code 97068
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Receipt

C. Full Name (Last, First, Middle Initial) Richard Ashton		Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 4
Mailing Address 815 NW 9th		Transaction ID: C74953
City Gresham	State OR	Zip Code 97030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 105.00
Name of Employer Self Employed	Occupation Dentist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Receipt

SUBTOTAL of Receipts This Page (optional)

705.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Nina Avery Mailing Address PO Box 580 City State Zip Code Junction City OR 97448 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Housewife Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 4 Transaction ID: C74317 Amount of Each Receipt this Period 300.00 Receipt
B. Full Name (Last, First, Middle Initial) Dorothy Barger Mailing Address 9335 Mill Creek Rd City State Zip Code Tillamook OR 97141-9553 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 0 4 Transaction ID: C74901 Amount of Each Receipt this Period 150.00 Receipt
C. Full Name (Last, First, Middle Initial) Iral Barrett Mailing Address 343 Lower Lavista Ct NW City State Zip Code Salem OR 97304-4701 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 4 Transaction ID: C75183 Amount of Each Receipt this Period 500.00 Receipt

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Heather Berggren Mailing Address 2690 Coeur D Alene Drive City State Zip Code West Linn OR 97068-8228 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 0 4 Transaction ID: C74899 Amount of Each Receipt this Period 500.00 Receipt
B. Full Name (Last, First, Middle Initial) Morton Bishop Mailing Address 126 S.W. Parkside Lane City State Zip Code Portland OR 97201 FEC ID number of contributing federal political committee. C Name of Employer Pendleton Woolen Mills Occupation Sales Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 2 / 2 0 0 4 Transaction ID: C75096 Amount of Each Receipt this Period 1000.00 Receipt
C. Full Name (Last, First, Middle Initial) Donald Bowers Mailing Address 22009 Coburg Road City State Zip Code Harrisburg OR 97446 FEC ID number of contributing federal political committee. C Name of Employer Roy A. Bowers & Son Inc. Occupation Farmer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 4 Transaction ID: C75203 Amount of Each Receipt this Period 250.00 Receipt

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Gerald R. Brown
 Mailing Address 10217 SW Trapper Terrace

City State Zip Code
 Beaverton OR 97008

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 8 / 2 0 0 4

Transaction ID: C75208

Amount of Each Receipt this Period

250.00

Receipt

B. Full Name (Last, First, Middle Initial)
 James Butsch
 Mailing Address 7877 SW Edgewater East

City State Zip Code
 Wilsonville OR 97070-9482

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Farming

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 2 / 2 0 0 4

Transaction ID: C74711

Amount of Each Receipt this Period

25.00

Receipt

C. Full Name (Last, First, Middle Initial)
 Anna Cairney
 Mailing Address 2443 SW Montgomery Drive

City State Zip Code
 Portland OR 97201-1729

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 8 / 2 0 0 4

Transaction ID: C75192

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

775.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Gary R. Coe Mailing Address 6255 SW Sheridan Street City Portland State OR Zip Code 97225 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 4 Transaction ID: C75199 Amount of Each Receipt this Period 250.00 Receipt
B. Full Name (Last, First, Middle Initial) Terrill Collier Mailing Address 27450 SW Campbell Ln City West Linn State OR Zip Code 97068-9530 FEC ID number of contributing federal political committee. C Name of Employer Collier Arbor Care Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 4 Transaction ID: C75188 Amount of Each Receipt this Period 500.00 Receipt
C. Full Name (Last, First, Middle Initial) Kent Craford Mailing Address 1431 NE Shaver #2 City Portland State OR Zip Code 97212 FEC ID number of contributing federal political committee. C Name of Employer Gallitan Group Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 4 Transaction ID: C75206 Amount of Each Receipt this Period 250.00 Receipt

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Michael Craford

Mailing Address 10 Morgan Lane

City State Zip Code
 San Rafael CA 94901

FEC ID number of contributing federal political committee.

C

Name of Employer Information Requested

Occupation Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 8 / 2 0 0 4

Transaction ID: C75209

Amount of Each Receipt this Period

250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Don Deardorff

Mailing Address 1471 Pine Crest Dr

City State Zip Code
 Grants Pass OR 97526

FEC ID number of contributing federal political committee.

C

Name of Employer Four-Ply Inc.

Occupation CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 4 / 2 0 0 4

Transaction ID: C74843

Amount of Each Receipt this Period

255.00

Receipt

C. Full Name (Last, First, Middle Initial)
Patrick Donaldson

Mailing Address PO Box 18152

City State Zip Code
 Portland OR 97212-1933

FEC ID number of contributing federal political committee.

C

Name of Employer Information Requested

Occupation Security Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 8 / 2 0 0 4

Transaction ID: C75200

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1005.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Kenyon Eagon
Mailing Address 4080 SW Charming Wy

City State Zip Code
Portland OR 97225

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eagon Land Resources Co.
Inc.

Occupation
Real Estate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 8 / 2 0 0 4

Transaction ID: C75207

Amount of Each Receipt this Period

500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Vernon Egge
Mailing Address 90520 Coburg Rd

City State Zip Code
Eugene OR 97408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Egge Sand & Gravel

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 1 / 2 0 0 4

Transaction ID: 71030.C93373

Amount of Each Receipt this Period

850.00

Receipt

C. Full Name (Last, First, Middle Initial)
Pamela Ellis
Mailing Address 4948 Hampton Court

City State Zip Code
Lake Oswego OR 97035

FEC ID number of contributing
federal political committee.

C

Name of Employer
A.F.L.A.C.

Occupation
Sales Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 8 / 2 0 0 4

Transaction ID: C75196

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Jim Feldkamp

Mailing Address 3210 Kinsrow Ave Apt 267

City

Eugene

State

OR

Zip Code

97401-8866

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Congressional Candidate

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 1 / 2 0 0 4

Transaction ID: C74352

Amount of Each Receipt this Period

300.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Andrew Ferguson

Mailing Address 1188 Cherry Circle

City

Lake Oswego

State

OR

Zip Code

97034-6209

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Business Owner

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 4

Transaction ID: C74908

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Joe Ferguson

Mailing Address 1061 Chandler Road

City

Lake Oswego

State

OR

Zip Code

97034

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 2 / 2 0 0 4

Transaction ID: C75094

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Stuart Ferguson
 Mailing Address 2588 Ridgemont Drive

City State Zip Code
 Eugene OR 97405

FEC ID number of contributing federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 1 / 2 0 0 4

Transaction ID: C74356

Amount of Each Receipt this Period

150.00

Receipt

B. Full Name (Last, First, Middle Initial)
 Stuart Ferguson
 Mailing Address 2588 Ridgemont Drive

City State Zip Code
 Eugene OR 97405

FEC ID number of contributing federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 1 / 2 0 0 4

Transaction ID: C74357

Amount of Each Receipt this Period

300.00

Receipt

C. Full Name (Last, First, Middle Initial)
 Linda Flores
 Mailing Address PO Box 1148
 14154 SE Echo Valley Ct

City State Zip Code
 Clackamas OR 97015-1148

FEC ID number of contributing federal political committee.

C

Name of Employer
State of OregonOccupation
State Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 8 / 2 0 0 4

Transaction ID: C75184

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Carolyn Garland Mailing Address 31355 NW Milne Street P.O. Box 802 City Hillsboro State OR Zip Code 97123-0802 FEC ID number of contributing federal political committee. C Name of Employer Tuality Health Care Occupation Physician/Registered Nurse Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 4 Transaction ID: C74620 Amount of Each Receipt this Period 100.00 Receipt
B. Full Name (Last, First, Middle Initial) Anthony Giardina Mailing Address 5191 Firwood Drive City West Linn State OR Zip Code 97068-3001 FEC ID number of contributing federal political committee. C Name of Employer OR Assoc of Hospitals Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 4 Transaction ID: C75197 Amount of Each Receipt this Period 250.00 Receipt
C. Full Name (Last, First, Middle Initial) Genea Haratyk Mailing Address 3242 Kentwood Dr City Eugene State OR Zip Code 97401-8512 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 4 Transaction ID: C74319 Amount of Each Receipt this Period 300.00 Receipt

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Paul Harmon		Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 4
Mailing Address 32722 Peoria Road		Transaction ID: C74848
City Albany	State OR	Amount of Each Receipt this Period 105.00
Zip Code 97321		Receipt
FEC ID number of contributing federal political committee. C		
Name of Employer Hewlett-Packard	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

B. Full Name (Last, First, Middle Initial) J. Clayton Hering		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 4
Mailing Address 1708 SW Highland Road		Transaction ID: C75202
City Portland	State OR	Amount of Each Receipt this Period 1000.00
Zip Code 97221		Receipt
FEC ID number of contributing federal political committee. C		
Name of Employer Norris, Beggs & Simpson	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Eric Hoffman		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 4
Mailing Address 805 SW Broadway #2080		Transaction ID: C75191
City Portland	State OR	Amount of Each Receipt this Period 1000.00
Zip Code 97205		Receipt
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)

2105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Mark Hollaren		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 2 / 2 0 0 4
Mailing Address 2602 SW 28th Drive		Transaction ID: C75098
City Portland	State OR	Zip Code 97219
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self Employed	Occupation Physician	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Janice Hooson		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 2 / 2 0 0 4
Mailing Address 4308 SW Fraser Avenue		Transaction ID: C75071
City Portland	State OR	Zip Code 97225-1911
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Rebecca Ibarra		Date of Receipt M M / D D / Y Y Y Y 0 7 / 0 7 / 2 0 0 4
Mailing Address 401 Heartwood Lane		Transaction ID: C74455
City Roseburg	State OR	Zip Code 97470
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Self Employed	Occupation Self employed	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Michele Jaffe
Mailing Address 21469 WATERFORD PL

City State Zip Code
West Linn OR 97068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 2 / 2 0 0 4

Transaction ID: C75093

Amount of Each Receipt this Period

500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Olie Johansen
Mailing Address 6438 Littler Dr

City State Zip Code
Salem OR 97303

FEC ID number of contributing
federal political committee.

C

Name of Employer
Salem Nissan

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 0 4

Transaction ID: C74993

Amount of Each Receipt this Period

205.00

Receipt

C. Full Name (Last, First, Middle Initial)
JoAnne Johnson
Mailing Address PO Box 66

City State Zip Code
Riddle OR 97469-0066

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 0 4

Transaction ID: C74905

Amount of Each Receipt this Period

10000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10705.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Valerie Johnson Eves

Mailing Address 2118 Peregrine Ct.

City State Zip Code
West Linn OR 97068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Co-Gen. Co.

Occupation
Community Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3550.00

Date of Receipt

M M / D D / Y Y Y Y
07 28 2004

Transaction ID: C75189

Amount of Each Receipt this Period

2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
James Kelly

Mailing Address 221 4th Place

City State Zip Code
Manhattan Beach CA 90266

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
07 28 2004

Transaction ID: C75205

Amount of Each Receipt this Period

500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Paul A. Kerley

Mailing Address PO Box 5517
585 Union St. NE #207 Salem, OR 97

City State Zip Code
Salem OR 97304

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Property Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
07 28 2004

Transaction ID: C75190

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Denise Lilley
Mailing Address 1903 SW Jackson St

City State Zip Code
Portland OR 97201-2421

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 8 / 2 0 0 4

Transaction ID: C75204

Amount of Each Receipt this Period

250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Melissa Lowes
Mailing Address 4330 NE Alameda

City State Zip Code
Portland OR 97213

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 2 / 2 0 0 4

Transaction ID: C75092

Amount of Each Receipt this Period

500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Mark Madden
Mailing Address 1447 SW Highland Rd

City State Zip Code
Portland OR 97221

FEC ID number of contributing
federal political committee.

C

Name of Employer
WDC Properties

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 1 / 2 0 0 4

Transaction ID: C74910

Amount of Each Receipt this Period

1250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Lynne Maginnis

Mailing Address 12793 Sierra Vista Dr

City State Zip Code
 Lake Oswego OR 97035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Computerized Entry, Inc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 8 / 2 0 0 4

Transaction ID: C75195

Amount of Each Receipt this Period

250.00

Receipt

Full Name (Last, First, Middle Initial)

B. Robert McNitt

Mailing Address 40823 Huntley Rd SE

City State Zip Code
 Stayton OR 97383-9712

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 6 / 2 0 0 4

Transaction ID: C74401

Amount of Each Receipt this Period

300.00

Receipt

Full Name (Last, First, Middle Initial)

C. Donald McRae

Mailing Address PO Box 3329

City State Zip Code
 Bay City OR 97107-3329

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 8 / 2 0 0 4

Transaction ID: C74554

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Jed Meese

Mailing Address 88 Granite Street

City State Zip Code
 Ashland OR 97520

FEC ID number of contributing federal political committee.

C

Name of Employer
Vitaline CorporationOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 6 / 2 0 0 4

Transaction ID: C74419

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Mrs. R.G. Miller

Mailing Address 8400 SW Fairway DR

City State Zip Code
 Portland OR 97225

FEC ID number of contributing federal political committee.

C

Name of Employer
HomemakerOccupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 6 / 2 0 0 4

Transaction ID: C74436

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Ted Mortonson

Mailing Address 111 SW 5th Avenue 42nd Floor

City State Zip Code
 Portland OR 97204

FEC ID number of contributing federal political committee.

C

Name of Employer
Pacific Crest SecuritiesOccupation
Senior VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 8 / 2 0 0 4

Transaction ID: C75179

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

John Murphy

Mailing Address 411 W. Central

City State Zip Code
Sutherlin OR 97479

FEC ID number of contributing federal political committee.

C

Name of Employer
Murphy PlywoodOccupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
07 01 2004

Transaction ID: C74358

Amount of Each Receipt this Period

2500.00

Receipt

B. Full Name (Last, First, Middle Initial)

Timothy Murphy

Mailing Address 3101 Sabo Lane

City State Zip Code
West Linn OR 97068

FEC ID number of contributing federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
07 28 2004

Transaction ID: C75194

Amount of Each Receipt this Period

250.00

Receipt

C. Full Name (Last, First, Middle Initial)

Herbert Nill

Mailing Address PO Box 279

City State Zip Code
Junction City OR 97448

FEC ID number of contributing federal political committee.

C

Name of Employer
GuarantyOccupation
Business owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
07 09 2004

Transaction ID: C74578

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Lynda O'Neil
Mailing Address 16731 Greenbriar Road

City State Zip Code
Lake Oswego OR 97034

FEC ID number of contributing
federal political committee.

C

Name of Employer
O'Neil Builders

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 8 / 2 0 0 4

Transaction ID: C75211

Amount of Each Receipt this Period

250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Nelson Olf
Mailing Address 2736 Magnolia Way

City State Zip Code
Forest Grove OR 97116-1251

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific University

Occupation
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 9 / 2 0 0 4

Transaction ID: C74572

Amount of Each Receipt this Period

100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Lawrence Olsen
Mailing Address 285 N 10th St

City State Zip Code
Central Point OR 97502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 6 / 2 0 0 4

Transaction ID: C75130

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Raymond Ozyjowski

Mailing Address 3555 NE Davis Street

City State Zip Code
Portland OR 97232

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific-Crest Securities

Occupation
Institutional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 8 / 2 0 0 4

Transaction ID: C75210

Amount of Each Receipt this Period

250.00

Receipt

B. Full Name (Last, First, Middle Initial)

Bretislav Pecenka

Mailing Address 3979 Robin Ave

City State Zip Code
Eugene OR 97402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Real Estate Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 1 / 2 0 0 4

Transaction ID: C74318

Amount of Each Receipt this Period

150.00

Receipt

C. Full Name (Last, First, Middle Initial)

Glenn Pelikan

Mailing Address 2836 NE 54th Ave

City State Zip Code
Portland OR 97213-3403

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Engineering Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 2 / 2 0 0 4

Transaction ID: C75095

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Patrice Petsu		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 8 / 2 0 0 4
Mailing Address 1329 70th Avenue		Transaction ID: C75198
City Salem	State OR	Zip Code 97301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Salem Hospital	Occupation Physical Therapist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Receipt

B. Full Name (Last, First, Middle Initial) Donald Puchaty		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 0 1 / 2 0 0 4
Mailing Address 1338 Spyglass Drive		Transaction ID: C74313
City Eugene	State OR	Zip Code 97401-2058
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Receipt

C. Full Name (Last, First, Middle Initial) Richard Rasmussen		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 8 / 2 0 0 4
Mailing Address 1005 Starlite Pl		Transaction ID: C75214
City Grants Pass	State OR	Zip Code 97526
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Receipt

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Susana Rice
Mailing Address 344 Ventura Ave

City State Zip Code
Eugene OR 97405

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 1 / 2 0 0 4

Transaction ID: C74355

Amount of Each Receipt this Period

150.00

Receipt

B. Full Name (Last, First, Middle Initial)
James Rippey
Mailing Address 13271 SW Bull Mtn Rd

City State Zip Code
Tigard OR 97224-1738

FEC ID number of contributing
federal political committee.

C

Name of Employer
Columbia Management

Occupation
Money Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 4

Transaction ID: C74909

Amount of Each Receipt this Period

500.00

Receipt

C. Full Name (Last, First, Middle Initial)
James Russell
Mailing Address 1820 NE 104th Ave #66

City State Zip Code
Portland OR 97220

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 8 / 2 0 0 4

Transaction ID: C75185

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Kate Scheile
 Mailing Address 1410 SW Midvale Road

City State Zip Code
 Portland OR 97219-8529

FEC ID number of contributing federal political committee.

C

Name of Employer
SelfOccupation
Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 8 / 2 0 0 4

Transaction ID: C75201

Amount of Each Receipt this Period

250.00

Receipt

B. Full Name (Last, First, Middle Initial)
 Ede Schmidt
 Mailing Address 1237 Lake Front Rd

City State Zip Code
 Lake Oswego OR 97034

FEC ID number of contributing federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 2 / 2 0 0 4

Transaction ID: C75080

Amount of Each Receipt this Period

30.00

Receipt

C. Full Name (Last, First, Middle Initial)
 Ede Schmidt
 Mailing Address 1237 Lake Front Rd

City State Zip Code
 Lake Oswego OR 97034

FEC ID number of contributing federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 8 / 2 0 0 4

Transaction ID: C75187

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

530.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Steven Sherman
Mailing Address 21265 Serango Drive

City State Zip Code
West Linn OR 97068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Direct Market Solutions

Occupation
Sales & Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
07 20 2004

Transaction ID: C74906

Amount of Each Receipt this Period

200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Richard Sohn
Mailing Address PO Box 1001

City State Zip Code
Roseburg OR 97470

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coast Range LLC

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y
07 01 2004

Transaction ID: C74324

Amount of Each Receipt this Period

1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Gordon Sondland
Mailing Address 420 NW 11th Ave Ste 822

City State Zip Code
Portland OR 97209-2957

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aspen Investments

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
07 22 2004

Transaction ID: C75099

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Carl Stein
Mailing Address 888 NE Greenfield Drive

City State Zip Code
Grants Pass OR 97526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 8 / 2 0 0 4

Transaction ID: C75159

Amount of Each Receipt this Period

250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Sharon Stephens
Mailing Address 9800 Southeast Castle Court

City State Zip Code
Gresham OR 97080

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 6 / 2 0 0 4

Transaction ID: C74923

Amount of Each Receipt this Period

250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Thomas Stewart
Mailing Address 3420 Lakeside Dr

City State Zip Code
Eugene OR 97401

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cort Mackenzie & Company

Occupation
Trading

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 1 / 2 0 0 4

Transaction ID: C74315

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Corinne Strauser

Mailing Address 175 Berwick Rd

City State Zip Code
Lake Oswego OR 97034-2847

FEC ID number of contributing federal political committee.

CName of Employer
Coit McKenzi & CompanyOccupation
Trader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
07 28 2004

Transaction ID: C75182

Amount of Each Receipt this Period

500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Wayne H. Sullivan

Mailing Address 2109 Greene St

City State Zip Code
West Linn OR 97068-4106

FEC ID number of contributing federal political committee.

CName of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
07 28 2004

Transaction ID: C75193

Amount of Each Receipt this Period

500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Eva Swain

Mailing Address PO Box 330

City State Zip Code
Hood River OR 97031-0067

FEC ID number of contributing federal political committee.

CName of Employer
Swain MotorsOccupation
Automobile Dealers

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y
07 20 2004

Transaction ID: C74907

Amount of Each Receipt this Period

2250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Henry Swigert
Mailing Address 1425 SW 20th Ave Ste 104

City State Zip Code
Portland OR 97201-2485

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 8 / 2 0 0 4

Transaction ID: C75213

Amount of Each Receipt this Period

2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Margaret Thumel
Mailing Address P.O. Box 10944

City State Zip Code
Eugene OR 97440-2944

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 1 / 2 0 0 4

Transaction ID: C74316

Amount of Each Receipt this Period

450.00

Receipt

C. Full Name (Last, First, Middle Initial)
Patrice Titus
Mailing Address 10170 SW Sedlak Court

City State Zip Code
Tualatin OR 97062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 1 / 2 0 0 4

Transaction ID: C74330

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Peter Truitt

Mailing Address PO Box 309

City State Zip Code
 Salem OR 97308

FEC ID number of contributing
federal political committee.

C

Name of Employer
Truitt Bros., Inc.

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 2 / 2 0 0 4

Transaction ID: C75097

Amount of Each Receipt this Period

500.00

Receipt

B. Full Name (Last, First, Middle Initial)

Rosemary Umsted

Mailing Address 1744 Sunburst Ter NW

City State Zip Code
 Salem OR 97304-2827

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 7 / 2 0 0 4

Transaction ID: C74491

Amount of Each Receipt this Period

100.00

Receipt

C. Full Name (Last, First, Middle Initial)

John Velehradsky

Mailing Address 6920 SW 182nd Ave

City State Zip Code
 Aloha OR 97007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 9 / 2 0 0 4

Transaction ID: C74947

Amount of Each Receipt this Period

160.00

Receipt

SUBTOTAL of Receipts This Page (optional)

760.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Ronald Walker

Mailing Address PO Box 8100

City State Zip Code
 Brookings OR 97415

FEC ID number of contributing federal political committee.

C

Name of Employer
Coast Auto Center, Inc.Occupation
Auto Dealer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 2 / 2 0 0 4

Transaction ID: C75091

Amount of Each Receipt this Period

2500.00

Receipt

B. Full Name (Last, First, Middle Initial)

Charlene Weichman

Mailing Address 973 NW Hillside Park Dr

City State Zip Code
 Bend OR 97701

FEC ID number of contributing federal political committee.

C

Name of Employer
Century Ins.Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 9 / 2 0 0 4

Transaction ID: C74987

Amount of Each Receipt this Period

50.00

Receipt

C. Full Name (Last, First, Middle Initial)

Charlene Weichman

Mailing Address 973 NW Hillside Park Dr

City State Zip Code
 Bend OR 97701

FEC ID number of contributing federal political committee.

C

Name of Employer
Century Ins.Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 8 / 2 0 0 4

Transaction ID: C75186

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Walter Whitehead

Mailing Address P.O. Box 471

City State Zip Code
 Gold Beach OR 97444

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employedOccupation
Real Estate Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 7 / 2 0 0 4

Transaction ID: C74494

Amount of Each Receipt this Period

100.00

Receipt

B. Full Name (Last, First, Middle Initial)

James M. Wilson

Mailing Address 21458 Oak Ln

City State Zip Code
 Aurora OR 97002

FEC ID number of contributing federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 5 / 2 0 0 4

Transaction ID: C74887

Amount of Each Receipt this Period

50.00

Receipt

C. Full Name (Last, First, Middle Initial)

Michael Young

Mailing Address 7916 Se Taylor

City State Zip Code
 Portland OR 97215

FEC ID number of contributing federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 4 / 2 0 0 4

Transaction ID: C74839

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

54085.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 85

(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Republican National Committee

Mailing Address 310 First St SE

City State Zip Code
 Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer
Republican National Commi-
tee

Occupation
Political Party

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 7 / 2 0 0 4

Transaction ID: C75158

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 85

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Republican National Committee

Mailing Address 310 First St SE

City State Zip Code
 Washington DC 20003-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Republican National Commi-
tee

Occupation
Political Party

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15156.47

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 5 / 2 0 0 4

Transaction ID: C75444

Amount of Each Receipt this Period

13656.47

Transfers From Affil./Aut-
h.

B. Full Name (Last, First, Middle Initial)

Republican National Committee

Mailing Address 310 First St SE

City State Zip Code
 Washington DC 20003-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Republican National Commi-
tee

Occupation
Political Party

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150479.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 9 / 2 0 0 4

Transaction ID: C75181

Amount of Each Receipt this Period

135322.53

Transfers From Affil./Aut-
h.

SUBTOTAL of Receipts This Page (optional)

148979.00

TOTAL This Period (last page this line number only)

148979.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 85

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Department Oregon Employment

Mailing Address PO Box 14010

City State Zip Code
 Salem OR 97309-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

741.20

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 9 / 2 0 0 4

Transaction ID: C75008

Amount of Each Receipt this Period

741.20

Offsets to Operating Expe-
nditu

SUBTOTAL of Receipts This Page (optional)

741.20

TOTAL This Period (last page this line number only)

741.20

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 44 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Joe Alvernaz

Mailing Address 3874 Azzlea Avenue

City Albany State OR Zip Code 97322-

Purpose of Disbursement
TRAVEL EXPENSE REIMB.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9853

Date of Disbursement

/

Amount of Each Disbursement this Period

45.14

TRAVEL EXPENSE REIMB.

Full Name (Last, First, Middle Initial)

B. Cascade Cascade Sound

Mailing Address PO Box 12097

City Salem State OR Zip Code 97309-

Purpose of Disbursement
SOUND SYSTEM RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9997

Date of Disbursement

/

Amount of Each Disbursement this Period

1220.00

SOUND SYSTEM RENTAL

Full Name (Last, First, Middle Initial)

C. Computer Village

Mailing Address 4075 76th Ave NE

City Salem State OR Zip Code 97305-

Purpose of Disbursement
NETWORK MAINTENANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9951

Date of Disbursement

/

Amount of Each Disbursement this Period

1525.00

NETWORK MAINTENANCE

SUBTOTAL of Disbursements This Page (optional)

2790.14

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 45 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Cort Furniture Rental

Mailing Address 9495 SW Cascade Avenue

City
Beaverton

State
OR

Zip Code
97008-

Purpose of Disbursement
FURNITURE RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9953

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3049.06

FURNITURE RENTAL

Full Name (Last, First, Middle Initial)

B. Megan Deras

Mailing Address 5150 SW Landing Drive Unit 201

City
Portland

State
OR

Zip Code
97238-

Purpose of Disbursement
TRAVEL EXPENSE REIMB.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9851

Date of Disbursement

/ /

Amount of Each Disbursement this Period

485.14

TRAVEL EXPENSE REIMB.

Full Name (Last, First, Middle Initial)

C. Deschutes County Central Committee

Mailing Address 18160 Cottonwood Rd PMB #448

City
Bend

State
OR

Zip Code
97707-

Purpose of Disbursement
JULY-NOV 2004 OFFICE RENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9849

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6000.00

JULY-NOV 2004 OFFICE RENT

SUBTOTAL of Disbursements This Page (optional)

9534.20

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 46 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. DH & Associates

Mailing Address PO Box 1083

City
Salem

State
OR

Zip Code
97308-

Purpose of Disbursement
STATE & FEDERAL REPORTING SERVI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9784

Date of Disbursement

07 / 07 / 2004

Amount of Each Disbursement this Period

2500.00

STATE & FEDERAL REPORTING
SERVI

Full Name (Last, First, Middle Initial)

B. Direct Mail Systems, Inc

Mailing Address 12450 Automobile Boulevard

City
Clearwater

State
FL

Zip Code
34622-

Purpose of Disbursement
DIRECT MAIL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9735

Date of Disbursement

07 / 02 / 2004

Amount of Each Disbursement this Period

1000.00

DIRECT MAIL

Full Name (Last, First, Middle Initial)

C. Direct Mail Systems, Inc

Mailing Address 12450 Automobile Boulevard

City
Clearwater

State
FL

Zip Code
34622-

Purpose of Disbursement
DIRECT MAIL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9819

Date of Disbursement

07 / 09 / 2004

Amount of Each Disbursement this Period

1000.00

DIRECT MAIL

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 47 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Direct Mail Systems, Inc

Mailing Address 12450 Automobile Boulevard

City Clearwater State FL Zip Code 34622-

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9883

Date of Disbursement

07 / 20 / 2004

Amount of Each Disbursement this Period

3000.00

POSTAGE

Full Name (Last, First, Middle Initial)

B. East Portland Community Center

Mailing Address 740 SE 106th Avenue

City Portland State OR Zip Code 97216-

Purpose of Disbursement
ROOM RENTAL FEES/OGOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9964

Date of Disbursement

07 / 28 / 2004

Amount of Each Disbursement this Period

410.00

ROOM RENTAL FEES/OGOP

Full Name (Last, First, Middle Initial)

C. Equity Office

Mailing Address Dept. #16231-8243832
2 North Riverside Plaza

City Chicago State IL Zip Code 60606-

Purpose of Disbursement
RENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9979

Date of Disbursement

07 / 19 / 2004

Amount of Each Disbursement this Period

706.61

RENT

SUBTOTAL of Disbursements This Page (optional)

4116.61

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 48 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Equity Office

Mailing Address Dept. #16231-8243832
2 North Riverside Plaza

City Chicago State IL Zip Code 60606-

Purpose of Disbursement
PDX OFFICE RENT DEPOSIT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9978

Date of Disbursement

07 / 19 / 2004

Amount of Each Disbursement this Period

1685.00

PDX OFFICE RENT DEPOSIT

Full Name (Last, First, Middle Initial)

B. Expert Checks

Mailing Address edgewater

City Salem State OR Zip Code 97304-

Purpose of Disbursement
CHECKS FOR FEDERAL VICTORY ACCOUNT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9864

Date of Disbursement

07 / 14 / 2004

Amount of Each Disbursement this Period

96.23

CHECKS FOR FEDERAL VICTORY
ACCOUNT

Full Name (Last, First, Middle Initial)

C. Expert Checks

Mailing Address edgewater

City Salem State OR Zip Code 97304-

Purpose of Disbursement
COMPUTER CHECKS FOR TRANSFER ACCT.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9983

Date of Disbursement

07 / 30 / 2004

Amount of Each Disbursement this Period

96.23

COMPUTER CHECKS FOR TRANS-
FER ACCT.

SUBTOTAL of Disbursements This Page (optional)

1877.46

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 49 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
TELEMARKETING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9737

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1799.00

TELEMARKETING

Full Name (Last, First, Middle Initial)

B. FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
TELEMARKETING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9820

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1939.19

TELEMARKETING

Full Name (Last, First, Middle Initial)

C. Stephen Fox

Mailing Address 25217 Herford Drive

City Ramona State CA Zip Code 92065-

Purpose of Disbursement
TRAVEL EXPENSE REIMB.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9815

Date of Disbursement

/ /

Amount of Each Disbursement this Period

69.84

TRAVEL EXPENSE REIMB.

SUBTOTAL of Disbursements This Page (optional)

3808.03

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 50 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Global Events Group

Mailing Address PO Box 3024

City
Portland

State
OR

Zip Code
97208-

Purpose of Disbursement
VOTER REG. BOOTH RENTAL/OGOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9949

Date of Disbursement

/ /

Amount of Each Disbursement this Period

750.00

VOTER REG. BOOTH RENTAL/O-GOP

Full Name (Last, First, Middle Initial)

B. Ron Herbison

Mailing Address 26991 Briggs Hill Road

City
Eugene

State
OR

Zip Code
97405-

Purpose of Disbursement
TRAVEL EXPENSE REIMB.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9854

Date of Disbursement

/ /

Amount of Each Disbursement this Period

452.56

TRAVEL EXPENSE REIMB.

Full Name (Last, First, Middle Initial)

C. Jackson County Central Com. #315

Mailing Address 226 Entrada Drive

City
Eagle Point

State
OR

Zip Code
97524-

Purpose of Disbursement
JULY 2004 VICTORY HQ RENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9847

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

JULY 2004 VICTORY HQ RENT

SUBTOTAL of Disbursements This Page (optional)

1702.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 51 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. David Jaques

Mailing Address 800 Winston Section Road

City
Winston

State
OR

Zip Code
97496-

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9960

Date of Disbursement

/ /

Amount of Each Disbursement this Period

645.15

TRAVEL EXPENSE REIMBURSEMENT

Full Name (Last, First, Middle Initial)

B. Key Bank**

Mailing Address 1500 Edgewater St NW

City
Salem

State
OR

Zip Code
97304-

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E10038

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3.00

BANK FEES

Full Name (Last, First, Middle Initial)

C. Kingstad Meeting Centers

Mailing Address 15450 SW Millikan Way

City
Beaverton

State
OR

Zip Code
97006-

Purpose of Disbursement
TRAINING ROOM FEES/OGOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9963

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

TRAINING ROOM FEES/OGOP

SUBTOTAL of Disbursements This Page (optional)

948.15

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 52 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. John Koehn

Mailing Address 6210 SW Bonita Road
Apt D203

City Lake Oswego State OR Zip Code 97035-

Purpose of Disbursement
TRAVEL EXPENSE REIMB.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9850

Date of Disbursement

07 / 09 / 2004

Amount of Each Disbursement this Period

291.59

TRAVEL EXPENSE REIMB.

Full Name (Last, First, Middle Initial)

B. Amy Langdon

Mailing Address 2830 Foxhaven Dr S

City Salem State OR Zip Code 97306-

Purpose of Disbursement
TRAVEL EXPENSE REIMB.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9739

Date of Disbursement

07 / 02 / 2004

Amount of Each Disbursement this Period

664.30

TRAVEL EXPENSE REIMB.

Full Name (Last, First, Middle Initial)

C. Marc Lucca

Mailing Address 170 W Ellendale Ave Ste 103
PMB 105

City Dallas State OR Zip Code 97338-1456

Purpose of Disbursement
TRAVEL EXPENSE REIMB.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9856

Date of Disbursement

07 / 09 / 2004

Amount of Each Disbursement this Period

130.20

TRAVEL EXPENSE REIMB.

SUBTOTAL of Disbursements This Page (optional)

1086.09

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 53 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Marc Lucca

Mailing Address 170 W Ellendale Ave Ste 103
PMB 105

City Dallas State OR Zip Code 97338-1456

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9961

Date of Disbursement

07 / 26 / 2004

Amount of Each Disbursement this Period

574.21

TRAVEL EXPENSE REIMBURSEMENT

Full Name (Last, First, Middle Initial)

B. Kevin Mannix

Mailing Address 375 18th St NE

City Salem State OR Zip Code 97301-4307

Purpose of Disbursement
FEB. 04 TRAVEL REIMB.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9740

Date of Disbursement

07 / 02 / 2004

Amount of Each Disbursement this Period

989.34

FEB. 04 TRAVEL REIMB.

Full Name (Last, First, Middle Initial)

C. Oregon International Airshow

Mailing Address PO Box 37

City Hillsboro State OR Zip Code 97123-

Purpose of Disbursement
VOTER REG. BOOTH RENTAL/OGOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9950

Date of Disbursement

07 / 14 / 2004

Amount of Each Disbursement this Period

250.00

VOTER REG. BOOTH RENTAL/O-GOP

SUBTOTAL of Disbursements This Page (optional)

1813.55

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 54 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Paul R. Perkins

Mailing Address 19740 Wildwood Drive

City
West Linn

State
OR

Zip Code
97068-

Purpose of Disbursement
TRAVEL EXPENSE REIMB.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9858

Date of Disbursement

07 / 09 / 2004

Amount of Each Disbursement this Period

86.75

TRAVEL EXPENSE REIMB.

Full Name (Last, First, Middle Initial)

B. Dawn Phillips

Mailing Address 910 SE 54th Ave

City
Hillsboro

State
OR

Zip Code
97123-

Purpose of Disbursement
TRAVEL EXPENSE REIMB.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9855

Date of Disbursement

07 / 09 / 2004

Amount of Each Disbursement this Period

477.35

TRAVEL EXPENSE REIMB.

Full Name (Last, First, Middle Initial)

C. US Postmaster

Mailing Address 410 Mill St SE

City
Salem

State
OR

Zip Code
97301-

Purpose of Disbursement
BRE ACCOUNT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9821

Date of Disbursement

07 / 09 / 2004

Amount of Each Disbursement this Period

500.00

BRE ACCOUNT

SUBTOTAL of Disbursements This Page (optional)

1064.10

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 55 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Rent-a-PC

Mailing Address PO Box 452

City State Zip Code
Laurel NY 11948-

Purpose of Disbursement
OFFICE EQUIP PURCHASE/PROJECTOR

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9859

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1900.00

OFFICE EQUIP PURCHASE/PRO-
JECTOR

Full Name (Last, First, Middle Initial)

B. The Oregon Jamboree

Mailing Address PO Box 430

City State Zip Code
Sweet Home OR 97386-

Purpose of Disbursement
VOTER REG. BOOTH RENTAL/OGOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9962

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1130.00

VOTER REG. BOOTH RENTAL/O-
GOP

Full Name (Last, First, Middle Initial)

C. Margaret Wu

Mailing Address 13380 SE Portland View Place

City State Zip Code
Portland OR 97236-

Purpose of Disbursement
TRAVEL EXPENSE REIMB.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9852

Date of Disbursement

/ /

Amount of Each Disbursement this Period

217.60

TRAVEL EXPENSE REIMB.

SUBTOTAL of Disbursements This Page (optional)

3247.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 56 / 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Solomon Yue

Mailing Address 265 50th Ave NW

City
Salem

State
OR

Zip Code
97304-3221

Purpose of Disbursement
TRAVEL EXPENSE REIMB.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9738

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	0	4

Amount of Each Disbursement this Period

740.24

TRAVEL EXPENSE REIMB.

SUBTOTAL of Disbursements This Page (optional)

740.24

TOTAL This Period (last page this line number only)

37228.73

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 57 / 85

☐ 21b ☒ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Oregon Republican Party

Mailing Address Key Bank NonFederal Acct
1500 Edgewater St NW

City Salem State OR Zip Code 97302-

Purpose of Disbursement
7-15-04 PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9865

Date of Disbursement

M M / D D / Y Y Y Y
07 / 15 / 2004

Amount of Each Disbursement this Period

3425.00

Full Name (Last, First, Middle Initial)

B. Oregon Republican Party

Mailing Address Key Bank NonFederal Acct
1500 Edgewater St NW

City Salem State OR Zip Code 97302-

Purpose of Disbursement
7-15-04 PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9866

Date of Disbursement

M M / D D / Y Y Y Y
07 / 15 / 2004

Amount of Each Disbursement this Period

1200.00

Full Name (Last, First, Middle Initial)

C. Oregon Republican Party

Mailing Address Key Bank NonFederal Acct
1500 Edgewater St NW

City Salem State OR Zip Code 97302-

Purpose of Disbursement
TRANSFER TO STATE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9711

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2004

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)

4925.00

TOTAL This Period (last page this line number only)

4925.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 58 / 85

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Joe Alvernaz

Mailing Address 3874 Azzlea Avenue

City Albany State OR Zip Code 97322-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9826

Date of Disbursement

07 / 01 / 2004

Amount of Each Disbursement this Period

1403.00

FEA PAYROLL

Full Name (Last, First, Middle Initial)

B. Joe Alvernaz

Mailing Address 3874 Azzlea Avenue

City Albany State OR Zip Code 97322-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9968

Date of Disbursement

07 / 15 / 2004

Amount of Each Disbursement this Period

1403.01

FEA PAYROLL

Full Name (Last, First, Middle Initial)

C. Michelle Ashenfelter

Mailing Address 2012 NE 15th

City Portland State OR Zip Code 97212-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9827

Date of Disbursement

07 / 01 / 2004

Amount of Each Disbursement this Period

2018.33

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

4824.34

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 59 / 85

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Michelle Ashenfelter

Mailing Address 2012 NE 15th

City
Portland

State
OR

Zip Code
97212-

Purpose of Disbursement
FEA PAYROLL BONUS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9729

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1322.72

FEA PAYROLL BONUS

Full Name (Last, First, Middle Initial)

B. Michelle Ashenfelter

Mailing Address 2012 NE 15th

City
Portland

State
OR

Zip Code
97212-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9975

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1554.89

FEA PAYROLL

Full Name (Last, First, Middle Initial)

C. Megan Deras

Mailing Address 5150 SW Landing Drive Unit 201

City
Portland

State
OR

Zip Code
97238-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9829

Date of Disbursement

/ /

Amount of Each Disbursement this Period

866.47

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

3744.08

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 60 / 85

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Megan Deras

Mailing Address 5150 SW Landing Drive Unit 201

City Portland State OR Zip Code 97238-

Purpose of Disbursement
FEA PAYROLL 7-1-04 TO 7-13-04

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9861

Date of Disbursement

/ /

Amount of Each Disbursement this Period

733.66

FEA PAYROLL 7-1-04 TO 7-1-3-04

Full Name (Last, First, Middle Initial)

B. Stephen Fox

Mailing Address 25217 Herford Drive

City Ramona State CA Zip Code 92065-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9830

Date of Disbursement

/ /

Amount of Each Disbursement this Period

866.47

FEA PAYROLL

Full Name (Last, First, Middle Initial)

C. Stephen Fox

Mailing Address 25217 Herford Drive

City Ramona State CA Zip Code 92065-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9969

Date of Disbursement

/ /

Amount of Each Disbursement this Period

866.47

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

2466.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 61 / 85

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Kelly Fuller

Mailing Address 1025 15th Street NE

City Salem State OR Zip Code 97301-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9831

Date of Disbursement

07 / 01 / 2004

Amount of Each Disbursement this Period

401.23

FEA PAYROLL

Full Name (Last, First, Middle Initial)

B. Kelly Fuller

Mailing Address 1025 15th Street NE

City Salem State OR Zip Code 97301-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9976

Date of Disbursement

07 / 15 / 2004

Amount of Each Disbursement this Period

501.81

FEA PAYROLL

Full Name (Last, First, Middle Initial)

C. Ron Herbison

Mailing Address 26991 Briggs Hill Road

City Eugene State OR Zip Code 97405-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9832

Date of Disbursement

07 / 01 / 2004

Amount of Each Disbursement this Period

842.46

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1745.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 62 / 85

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Ron Herbison

Mailing Address 26991 Briggs Hill Road

City Eugene State OR Zip Code 97405-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9970

Date of Disbursement

M M / D D / Y Y Y Y
07 / 15 / 2004

Amount of Each Disbursement this Period

842.47

FEA PAYROLL

Full Name (Last, First, Middle Initial)

B. David Jaques

Mailing Address 800 Winston Section Road

City Winston State OR Zip Code 97496-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9812

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2004

Amount of Each Disbursement this Period

1233.78

FEA PAYROLL

Full Name (Last, First, Middle Initial)

C. David Jaques

Mailing Address 800 Winston Section Road

City Winston State OR Zip Code 97496-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9971

Date of Disbursement

M M / D D / Y Y Y Y
07 / 15 / 2004

Amount of Each Disbursement this Period

1233.78

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

3310.03

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 63 / 85

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Key Bank**

Mailing Address 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9732

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2004

Amount of Each Disbursement this Period

1926.72

FEA PAYROLL TAXES

Full Name (Last, First, Middle Initial)

B. Key Bank**

Mailing Address 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9836

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2004

Amount of Each Disbursement this Period

3555.50

FEA PAYROLL TAXES

Full Name (Last, First, Middle Initial)

C. Key Bank**

Mailing Address 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9977

Date of Disbursement

M M / D D / Y Y Y Y
07 / 15 / 2004

Amount of Each Disbursement this Period

3179.98

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

8662.20

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 64 / 85

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Key Bank**

Mailing Address 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9881

Date of Disbursement

/

Amount of Each Disbursement this Period

1354.84

FEA PAYROLL TAXES

Full Name (Last, First, Middle Initial)

B. Key Bank**

Mailing Address 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA Q2 940 TAX

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E10000

Date of Disbursement

/

Amount of Each Disbursement this Period

140.17

FEA Q2 940 TAX

Full Name (Last, First, Middle Initial)

C. Key Bank**

Mailing Address 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA 2ND Q 940 TAX

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9890

Date of Disbursement

/

Amount of Each Disbursement this Period

35.99

FEA 2ND Q 940 TAX

SUBTOTAL of Disbursements This Page (optional)

1531.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 65 / 85

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. John Koehn

Mailing Address 6210 SW Bonita Road
Apt D203

City Lake Oswego State OR Zip Code 97035-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9833

Date of Disbursement

07 / 01 / 2004

Amount of Each Disbursement this Period

866.46

FEA PAYROLL

Full Name (Last, First, Middle Initial)

B. John Koehn

Mailing Address 6210 SW Bonita Road
Apt D203

City Lake Oswego State OR Zip Code 97035-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9972

Date of Disbursement

07 / 15 / 2004

Amount of Each Disbursement this Period

866.47

FEA PAYROLL

Full Name (Last, First, Middle Initial)

C. Amy Langdon

Mailing Address 2830 Foxhaven Dr S

City Salem State OR Zip Code 97306-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9730

Date of Disbursement

07 / 01 / 2004

Amount of Each Disbursement this Period

2059.94

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

3792.87

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 66 / 85

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Amy Langdon

Mailing Address 2830 Foxhaven Dr S

City State Zip Code
Salem OR 97306-

Purpose of Disbursement

FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9879

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2059.96

FEA PAYROLL

Full Name (Last, First, Middle Initial)

B. Marc Lucca

Mailing Address 170 W Ellendale Ave Ste 103
PMB 105

City State Zip Code
Dallas OR 97338-1456

Purpose of Disbursement

FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9834

Date of Disbursement

/ /

Amount of Each Disbursement this Period

792.46

FEA PAYROLL

Full Name (Last, First, Middle Initial)

C. Marc Lucca

Mailing Address 170 W Ellendale Ave Ste 103
PMB 105

City State Zip Code
Dallas OR 97338-1456

Purpose of Disbursement

FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9973

Date of Disbursement

/ /

Amount of Each Disbursement this Period

792.47

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

3644.89

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 67 / 85

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Oregon Department of Revenue

Mailing Address PO Box 14800

City
Salem

State
OR

Zip Code
97309-

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9733

Date of Disbursement

/ /

Amount of Each Disbursement this Period

471.00

FEA PAYROLL TAXES

Full Name (Last, First, Middle Initial)

B. Oregon Department of Revenue

Mailing Address PO Box 14800

City
Salem

State
OR

Zip Code
97309-

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9837

Date of Disbursement

/ /

Amount of Each Disbursement this Period

901.00

FEA PAYROLL TAXES

Full Name (Last, First, Middle Initial)

C. Oregon Department of Revenue

Mailing Address PO Box 14800

City
Salem

State
OR

Zip Code
97309-

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9882

Date of Disbursement

/ /

Amount of Each Disbursement this Period

328.00

FEA PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 68 / 85

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Oregon Department of Revenue

Mailing Address PO Box 14800

City
Salem

State
OR

Zip Code
97309-

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9948

Date of Disbursement

/ /

Amount of Each Disbursement this Period

815.00

FEA PAYROLL TAXES

Full Name (Last, First, Middle Initial)

B. Oregon Department of Revenue

Mailing Address PO Box 14800

City
Salem

State
OR

Zip Code
97309-

Purpose of Disbursement
FEA Q2 OQ TAX

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E10001

Date of Disbursement

/ /

Amount of Each Disbursement this Period

801.51

FEA Q2 OQ TAX

Full Name (Last, First, Middle Initial)

C. Oregon Department of Revenue

Mailing Address PO Box 14800

City
Salem

State
OR

Zip Code
97309-

Purpose of Disbursement
FEA 2ND Q OQ TAX

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9891

Date of Disbursement

/ /

Amount of Each Disbursement this Period

771.01

FEA 2ND Q OQ TAX

SUBTOTAL of Disbursements This Page (optional)

2387.52

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 69 / 85

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Anastasia Pannas

Mailing Address 5225 Chapman St. S

City Salem State OR Zip Code 97306-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9731

Date of Disbursement

/

Amount of Each Disbursement this Period

784.51

FEA PAYROLL

Full Name (Last, First, Middle Initial)

B. Anastasia Pannas

Mailing Address 5225 Chapman St. S

City Salem State OR Zip Code 97306-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9880

Date of Disbursement

/

Amount of Each Disbursement this Period

784.52

FEA PAYROLL

Full Name (Last, First, Middle Initial)

C. Paul R. Perkins

Mailing Address 19740 Wildwood Drive

City West Linn State OR Zip Code 97068-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9835

Date of Disbursement

/

Amount of Each Disbursement this Period

866.47

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

2435.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 70 / 85

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Paul R. Perkins

Mailing Address 19740 Wildwood Drive

City State Zip Code
West Linn OR 97068-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9974

Date of Disbursement

/

Amount of Each Disbursement this Period

866.46

FEA PAYROLL

Full Name (Last, First, Middle Initial)

B. Reed Harris Mailhouse

Mailing Address 322 NW 14th

City State Zip Code
Portland OR 97210-

Purpose of Disbursement
FEA PRINTING EVENT INVITATIONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9857

Date of Disbursement

/

Amount of Each Disbursement this Period

1424.16

FEA PRINTING EVENT INVITA-
TIONS

Full Name (Last, First, Middle Initial)

C. Sign Strategies

Mailing Address 927 Calle Negocio
Suite L

City State Zip Code
San Clemente CA 92673-

Purpose of Disbursement
FEA COLLERAL MATERIAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: E9952

Date of Disbursement

/

Amount of Each Disbursement this Period

2935.98

FEA COLLERAL MATERIAL

SUBTOTAL of Disbursements This Page (optional)

5226.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 71 / 85

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Town Club of Eugene

Mailing Address 975 Oak Street, Suite 900

City
Eugene

State
OR

Zip Code
97401-

Purpose of Disbursement
FEA EVENT ROOM RENTAL FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: E9845

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1190.00

FEA EVENT ROOM RENTAL FEE

SUBTOTAL of Disbursements This Page (optional)

1190.00

TOTAL This Period (last page this line number only)

46661.13

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 72 / 85

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Advanced Office SystemsNature of Debt (Purpose):
riso supplies

Mailing Address P.O. Box 1193

City State ZIP Code
Tualatin OR 97062-1193

Outstanding Balance Beginning This Period

760.51

Transaction ID: 1LS71015.E13094

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

760.51

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AristotleNature of Debt (Purpose):
tech support

Mailing Address 205 Pennsylvania Ave SE

City State ZIP Code
Washington DC 20003-

Outstanding Balance Beginning This Period

3150.00

Transaction ID: 8LSE9896

Amount Incurred This Period

0.00

Payment This Period

1500.00

Outstanding Balance at Close of This Period

1650.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS ConnectNature of Debt (Purpose):
Telemarketing

Mailing Address 7320 N Dreamy Draw Dr

City State ZIP Code
Phoenix AZ 85020-5212

Outstanding Balance Beginning This Period

26038.74

Transaction ID: 6LSE11265

Amount Incurred This Period

10177.01

Payment This Period

3738.19

Outstanding Balance at Close of This Period

32477.56

1) SUBTOTALS This Period This Page (optional).....

34888.07

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 73 / 85

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Direct Mail Systems, Inc

Nature of Debt (Purpose):
Direct mail

Mailing Address 12450 Automobile Boulevard

City State ZIP Code
Clearwater FL 34622-

Outstanding Balance Beginning This Period

31201.06

Transaction ID: 11LSE10022

Amount Incurred This Period

1006.90

Payment This Period

0.00

Outstanding Balance at Close of This Period

32207.96

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Labels & Lists

Nature of Debt (Purpose):
voter file/lists-OGOP

Mailing Address 2500 116th Ave NE

City State ZIP Code
Bellevue WA 98004-

Outstanding Balance Beginning This Period

0.00

Transaction ID: 19LSE10027

Amount Incurred This Period

1086.54

Payment This Period

0.00

Outstanding Balance at Close of This Period

1086.54

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
WB Adams Insurance Co

Nature of Debt (Purpose):
liability insurance

Mailing Address 6290 SW Arctic Dr

City State ZIP Code
Beaverton OR 97005-

Outstanding Balance Beginning This Period

2150.00

Transaction ID: 18LS71002.E13089

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2150.00

1) **SUBTOTALS** This Period This Page (optional).....

35444.50

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 74 / 85

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Premiere Conferencing

Nature of Debt (Purpose):
phone bill

Mailing Address PO Box 87-5450

City State ZIP Code
Kansas City MO 64180-

Outstanding Balance Beginning This Period

1289.82

Transaction ID: 4LSE8720

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1289.82

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Computer Village

Nature of Debt (Purpose):
Computer maintenance

Mailing Address 4075 76th Ave NE

City State ZIP Code
Salem OR 97305-

Outstanding Balance Beginning This Period

2703.30

Transaction ID: 17LSE11565

Amount Incurred This Period

4767.90

Payment This Period

2235.00

Outstanding Balance at Close of This Period

5236.20

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Telecommunication Politel

Nature of Debt (Purpose):
telemarketing

Mailing Address 1711 W County Rd B #330N

City State ZIP Code
Saint Paul MN 55113-

Outstanding Balance Beginning This Period

4500.00

Transaction ID: 15LS70929.E13085

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4500.00

1) **SUBTOTALS** This Period This Page (optional).....

11026.02

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 75 / 85

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Fred Gabriel, PCNature of Debt (Purpose):
CPA services

Mailing Address 2011 State

City State ZIP Code
Salem OR 97301-

Outstanding Balance Beginning This Period

2150.00

Transaction ID: 16LSE11434

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2150.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Pitney Bowes Purchase PowerNature of Debt (Purpose):
Postage

Mailing Address PO Box 856042

City State ZIP Code
Louisville KY 40285-

Outstanding Balance Beginning This Period

61.99

Transaction ID: 7LSE8965

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

61.99

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Entertainment Communications NetworkNature of Debt (Purpose):
Fundraising mail

Mailing Address 4370 Tujunga Ave Suite 210

City State ZIP Code
Studio City CA 91604-

Outstanding Balance Beginning This Period

0.00

Transaction ID: 2LSE10026

Amount Incurred This Period

2764.20

Payment This Period

0.00

Outstanding Balance at Close of This Period

2764.20

1) SUBTOTALS This Period This Page (optional).....

4976.19

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 76 / 85

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Capitol Accounting ServiceNature of Debt (Purpose):
CPA services

Mailing Address PO Box 1304

City State ZIP Code
Silverton OR 97381-

Outstanding Balance Beginning This Period

0.00

Transaction ID: 14LSE10025

Amount Incurred This Period

2745.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2745.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Connolly & GoldianNature of Debt (Purpose):
legal services

Mailing Address PO Box 3095

City State ZIP Code
Salem OR 97302-

Outstanding Balance Beginning This Period

17852.72

Transaction ID: 12LS70929.E13084

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

17852.72

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Inc. Pacific NW TelcoNature of Debt (Purpose):
Phone installMailing Address 400 SW Sixth Avenue
Suite 500City State ZIP Code
Portland OR 97204-1605

Outstanding Balance Beginning This Period

0.00

Transaction ID: LSE10028

Amount Incurred This Period

1974.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1974.00

1) SUBTOTALS This Period This Page (optional).....

22571.72

2) TOTALS This Period (last page this line number only).....

108906.50

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 77 / 85

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Key Bank**

Mailing Address

1500 Edgewater St NW

City	State	Zip Code
Salem	OR	97304-

Purpose of Disbursement:
merchant feeCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

142894.95

Date

M	M
0	7

 /

D	D
0	2

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: H4E10016

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

109.12

194.00

303.12

B. Full Name (Last, First, Middle Initial)
Key Bank**

Mailing Address

1500 Edgewater St NW

City	State	Zip Code
Salem	OR	97304-

Purpose of Disbursement:
Bank feeCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

149649.29

Date

M	M
0	7

 /

D	D
0	6

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: H4E10017

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.60

6.40

10.00

C. Full Name (Last, First, Middle Initial)
Key Bank**

Mailing Address

1500 Edgewater St NW

City	State	Zip Code
Salem	OR	97304-

Purpose of Disbursement:
bank feeCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

152031.86

Date

M	M
0	7

 /

D	D
0	9

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: H4E10018

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.29

7.62

11.91

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

117.01

208.02

325.03

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 78 / 85
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Key Bank**

Mailing Address

1500 Edgewater St NW

City	State	Zip Code
Salem	OR	97304-

Purpose of Disbursement:
bank feeCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

158873.48

Date 07 / 30 / 2004

Transaction ID: H4E10020

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.08

1.92

3.00

B. Full Name (Last, First, Middle Initial)
Key Bank**

Mailing Address

1500 Edgewater St NW

City	State	Zip Code
Salem	OR	97304-

Purpose of Disbursement:
merchant feeCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

159236.79

Date 07 / 30 / 2004

Transaction ID: H4E10030

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

130.79

232.52

363.31

C. Full Name (Last, First, Middle Initial)
Key Bank**

Mailing Address

1500 Edgewater St NW

City	State	Zip Code
Salem	OR	97304-

Purpose of Disbursement:
merchant feeCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

143198.07

Date 07 / 02 / 2004

Transaction ID: H4E10249

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

109.12

194.00

303.12

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

240.99

428.44

669.43

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 79 / 85

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Gateway

Mailing Address

7565 Irvine Center Drive

City	State	Zip Code
Irvine	CA	92618-

Purpose of Disbursement:
credit card merchant feeCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

151579.95

Date

M	M
0	7

 /

D	D
0	6

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: H4E10251

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.60

6.40

10.00

B. Full Name (Last, First, Middle Initial)
Certified Property

Mailing Address

PO Box 269

City	State	Zip Code
Salem	OR	97308-0269

Purpose of Disbursement:
office rentCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

149149.29

Date

M	M
0	7

 /

D	D
0	2

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: H4E9734

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2052.00

3648.00

5700.00

C. Full Name (Last, First, Middle Initial)
QWest**

Mailing Address

PO Box 12480

City	State	Zip Code
Seattle	WA	98111-

Purpose of Disbursement:
phone billCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150018.44

Date

M	M
0	7

 /

D	D
0	6

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: H4E9783

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

132.89

236.26

369.15

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2188.49

3890.66

6079.15

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 80 / 85

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Coos County Republican Central Committ

Mailing Address

1156 N. 9th St.

City

State

Zip Code

Coos Bay

OR

97420-

Purpose of Disbursement:

Voter Registration/OGOP-generic

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

143230.07

Date

M M

/

D D

/

Y Y

Y Y

0 7

/

0 2

/

2 0

0 4

Transaction ID: H4E9840

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

11.52

20.48

32.00

B. Full Name (Last, First, Middle Initial)

Printistry Printing

Mailing Address

744 NE Third

City

State

Zip Code

Mcminnville

OR

97128-

Purpose of Disbursement:

Printing-business cards

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

143449.29

Date

M M

/

D D

/

Y Y

Y Y

0 7

/

0 2

/

2 0

0 4

Transaction ID: H4E9843

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

78.92

140.30

219.22

C. Full Name (Last, First, Middle Initial)

Rent-a-PC

Mailing Address

PO Box 452

City

State

Zip Code

Laurel

NY

11948-

Purpose of Disbursement:

projector rental

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

149639.29

Date

M M

/

D D

/

Y Y

Y Y

0 7

/

0 2

/

2 0

0 4

Transaction ID: H4E9844

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

176.40

313.60

490.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

266.84

474.38

741.22

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 81 / 85

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Remedy Intelligent Staffing

Mailing Address

File #54122

City	State	Zip Code
Los Angeles	CA	90074-4122

Purpose of Disbursement:
data entryCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

151569.95

Date 07 / 06 / 2004

Transaction ID: H4E9846

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
558.54		992.97		1551.51

B. Full Name (Last, First, Middle Initial)
Central Committee Lane County

Mailing Address

PO Box 10247

City	State	Zip Code
Eugene	OR	97440-2247

Purpose of Disbursement:
July 2004 Victory HQ RentCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

152019.95

Date 07 / 08 / 2004

Transaction ID: H4E9848

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
158.40		281.60		440.00

C. Full Name (Last, First, Middle Initial)
Kupl 98.7

Mailing Address

1501 SW Jefferson

City	State	Zip Code
Portland	OR	97201-

Purpose of Disbursement:
voter reg. booth rental/OGOPCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

152631.86

Date 07 / 12 / 2004

Transaction ID: H4E9860

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
216.00		384.00		600.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
932.94		1658.57		2591.51

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 82 / 85

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
KEZI News

Mailing Address
2975 Chad Drive

City State Zip Code
Eugene OR 97408-7344

Purpose of Disbursement:
Postage Reimbursement
Category/
Type
Activity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

152633.38

Date

M	M
0	7

 /

D	D
1	2

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: H4E9863

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.55

0.97

1.52

B. Full Name (Last, First, Middle Initial)
UPS

Mailing Address
Lockbox 577

City State Zip Code
Carol Stream IL 60132-0577

Purpose of Disbursement:
shipping
Category/
Type
Activity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

152736.48

Date

M	M
0	7

 /

D	D
2	1

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: H4E9889

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

37.12

65.98

103.10

C. Full Name (Last, First, Middle Initial)
Aristotle

Mailing Address
205 Pennsylvania Ave SE

City State Zip Code
Washington DC 20003-

Purpose of Disbursement:
tech support
Category/
Type
Activity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

158870.48

Date

M	M
0	7

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: H4E9896

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

540.00

960.00

1500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

577.67

1026.95

1604.62

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 83 / 85

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

QWest**

Mailing Address

PO Box 12480

City	State	Zip Code
Seattle	WA	98111-

Purpose of Disbursement:
phone depositCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

156936.48

Date

M	M
0	7

 /

D	D
2	2

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: H4E9958

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1512.00

2688.00

4200.00

B. Full Name (Last, First, Middle Initial)

QWest**

Mailing Address

PO Box 12480

City	State	Zip Code
Seattle	WA	98111-

Purpose of Disbursement:
phone billCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

157370.48

Date

M	M
0	7

 /

D	D
2	2

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: H4E9959

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

156.24

277.76

434.00

C. Full Name (Last, First, Middle Initial)

AT&T Wireless

Mailing Address

PO Box 30459

City	State	Zip Code
Los Angeles	CA	90030-

Purpose of Disbursement:
cell phone billCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

164278.33

Date

M	M
0	7

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: H4E9993

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1382.62

2457.99

3840.61

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3050.86

5423.75

8474.61

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 84 / 85

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Computer Village

Mailing Address

4075 76th Ave NE

City

State

Zip Code

Salem

OR

97305-

Purpose of Disbursement:
network maintenanceCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

160437.72

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	0	/	2	0	0	4

Transaction ID: H4E9998

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

255.60

454.40

710.00

B. Full Name (Last, First, Middle Initial)

Office Depot**

Mailing Address

2945 Liberty St S

City

State

Zip Code

Salem

OR

97306-

Purpose of Disbursement:
office suppliesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2111

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

159727.72

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	0	/	2	0	0	4

Transaction ID: H4E9999

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

176.73

314.20

490.93

C. Full Name (Last, First, Middle Initial)

Clackamas County Central Comm.

Mailing Address

PO Box 1326

City

State

Zip Code

Clackamas

OR

97015-

Purpose of Disbursement:
Voter Registration/OGOP-genericCategory/
TypeActivity or Event Identifier:
GV GENERICVOTER DRIVE

Type of Allocated Activity:

☐ Administrative ☐ Fundraising ☐ Exempt☒ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3957.04

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	4	/	2	0	0	4

Transaction ID: H4E10019

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

59.40

105.60

165.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

491.73

874.20

1365.93

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 85 / 85

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Marion County Central Committee

Mailing Address

PO Box 2670

City

Salem

State

OR

Zip Code

97308-

Purpose of Disbursement:

Voter Registration/OGOP-generic

Category/
Type

Type of Allocated Activity:

☐ Administrative ☐ Fundraising ☐ Exempt☒ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3792.04

Activity or Event Identifier:

GV GENERICVOTER DRIVE

Date

M M / D D / Y Y Y Y
0 7 / 0 2 / 2 0 0 4

Transaction ID: H4E9841

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1.80

3.20

5.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1.80

3.20

5.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

7868.33

13988.17

21856.50